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ID:HOFFBUHR & ASSOCIATES

FAX:541 770 2573

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FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.				
SECTION A - PROPERTY OWNER INFORMATION	A CONTRACTOR OF SOME PROPERTY LIES OF THE SE			
BUILDING OWNER'S NAME / INC.				
BUILDING STREET ADDRESS (Including Apt.; Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO. 347 SILVER CREEK DRIVE.				
CITY CENTRAL POINT STATE DREGON	ZIP CODE 97502			
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 17 BROOK FIELD ESTATES UNIT NO. 1 TAX LOT 6916	37 ZW 10BA			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)				
RESIGNATA HORIZONTAL DATUM: SOURCE: L. GPS (Type):				
(## - ## - ## ar ## ar ## ####) LINAD 1927 LINAD 1983 Quad Mer	Other:			
N/A				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				
	B3. STATE			
4/6584 Jackson Coanty JACKSON I	OREGON			
B4. MAP AND PANEL B5. SUFFIX B6. FIRM NOEX B7. FIRM PANEL B8. FLOOD DATE CONE(S) NUMBER B5. SUFFIX B6. FIRM NOEX B7. FIRM PANEL B8. FLOOD CONE(S) ASSERT CARD. B5. SUFFIX B6. FIRM NOEX B7. FIRM PANEL B8. FLOOD CONE(S)	BB. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)			
	1 2 2 3 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
1 LES DANDIE (LEBON LE L'ORIGINALINA DEGLIARIGA) DESCRIPTA	ve Comments			
B11. Indicate the elevation deturn used for the BFE in B9: [X] NGVD 1929 NAVD 1988 Other (D	(editor):			
B12. Is the building located in a Coastal Berrier Resources System (CBRS) area or Otherwise Protected An	Tes LAINO			
Designation Date: N/A				
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIR	ED)			
C1. Building elevations are based on: L. Construction Drawings* L. Building Under Construction*	XIFinished Construction			
To now Elevation Cartificate will be required when construction of the building is complete.				
C2. Building Diagram Number B (Select the building diagram most similar to the building for which this	certificate is being completed - see			
pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)	LADO ADIALL ADIAD			
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO				
Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used, if the datum is different from				
the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.				
calculation. Use the space provided of the Comments area of Section 5 of Section 5, as appropriate,	Department in animit in the in-			
Datum 1601/939 Conversion/Comments	er on the FIRM? IXI Yes I I No			
Elevation reference mark used <u>RM-/</u> Does the elevation reference mark used appeared a) Top of bottom floor (including basement or enclosure) 1269 3 ft.(pt)				
D b) Top of next higher floor 1/27/ 56 tof 3	AEG:STERED			
O c) Bottom of lowest horizontal structural member (V zonas only)	PROFESSIONAL			
O c) Bottom of lowest horizontal structural member (V zonas only) O d) Attached garage (top of stab)	LAND SURVEYOR			
C e) I nwest elevation of machiner√ and/of equipment				
	Danels G Mc Meli_			
D f) Lowest adjacent prade (LAG)				
a) Highest adjacent grade (HAG)	DREGON JULY 18, 1980			
D h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade /7	DOUGLAS C. McMAHAN No. 1913			
D i) Total area of all permanent openings (flood vents) in C3h 2025 sq. in. (sq. em)				
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION Expires 12/31/62				
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to	certify elevation information.			
Learthy that the information in Sections A. B. and C on this certificate represents my best efforts to interpret the data available.				
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Se	ction 1001.			
CERTIFIER'S NAME Ducilos C. Mc Mahan LIGENSE NUMBER	LS 1913			
TITLE LAND SURVEYOR COMPANY NAME, OF FBUHR &	ASSOC, INC.			
ADDRESS 1062 BAST JAKKUM STREET MEDFORD THE	REGAN ZIP CODE 9-7504			
SIGNATURE DATE 0/17/01 TELEPH	- VIII 1931			
FEMA Form 81-31, AUG 99 SEE REVERSE SIDE FOR CONTINUATION REP	LACES ALL PREVIOUS EDITIONS			

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IMPORTANT: In these spaces, c	opy the corresponding informatio	n from Section A.	hounsmanner non	
BUILDING STREET ADDRESS (Included 347 Silver Cree	ling Apt., Unit, Suite, and/or Bidg. No.) O	R P.O. ROUTE AND BOX NO.	1999-00 (40 K) (40 K) (40 K)	
CITY Country Print	STATE	10000 97	P CODE PARTICULAR PROPERTY OF THE PARTY OF T	
SECTION	D - SURVEYOR, ENGINEER, OR A	RCHITECT CERTIFICATION	ON (CONTINUED)	
Copy both sides of this Elevation C	Pertificate for (1) community official, (2) insurance agent/compar	y, and (3) building owner.	
	OR BLBUATION D			PLANOF
"BROOKFIBLD ESTAT	tes grading plan"	prepared by c	EC ENGINEER	1NG. ALOOD
CTUDY BY THORNTO	n engmeering H	45 BEEN AKCE	PPED BY THE	CITY OF
CENTION DOINT FORD	RETERMINING THIS ELEV	ノみてノロヘン	Check here	if attachments
SECTION E - BUILDING ELEV	ATION INFORMATION (SURVEY	NOT REQUIRED) FOR ZO	NE AO AND ZONE A (WIT	HOUT BFE)
For Zone AO and Zone A (without B	IFE), complete Items E1 through E4	. If the Elevation Certificate	is intended for use as supp	องหมุ่งช
Information for a LOMA or LOMR-F.	, Section C must be completed. (Select the building diagram most	similar to the building for w	hich this certificate is being	completed -
	وسافوان والمناف	_ `dala a aliadah as ababa	wanh.i	,
E2. The top of the bottom floor (incl	uding basement or enclosure) of the	building is ft.(m)) above	or \to below
(check one) the monest adjacet	nt grade. openings (see page 7), the next higi			
1. I I I (im) 1.44(2kin (cm) abo	ve the highest adjacent grade.			
E4. For Zone AO only. If no flood d	lepth number is available, is the top nce? XIYes No Unkno	of the bottom floor elevated taum The local official must	in accordance with the con certify this information in Se	nmunny s action G.
lloodplain management ordinal SECTION	F - PROPERTY OWNER (OR OWN	ER'S REPRESENTATIVE	CERTIFICATION	
The property owner or owner's aut	horized representative who complete	es Sections A, B, and E for	Zone A (without a FEMA-is	sued or
community-Issued BFE) or Zone A	O must sign here.			
PROPERTY OWNER'S OR OWNER'S	S AUTHORIZED REPRESENTATIVE'S I	NAME		
ADDRESS		YTK	STATE ZIP CODE	-
SIGNATURE	:	DATE	TELEPHONE	
COMMENTS				
79		· · · · · · · · · · · · · · · · · · ·	Check here	if attachments
	SECTION G - COMMUNITY			
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete				
Sections A. H. C. (or F) and G. of this	la Elevation Certificate. Complete th C was taken from other documental	e applicable (tem(s) and si	jn below.	
engineer, or architect who	is authorized by state or local law to	certify elevation informatio	n. (Indicate the source and	date of the
etayation data in the Comp	ments area below.)			
	leted Section E for a building located	in Zone A (Wilhout B FEM/	4-legabo of community-lead	96 BI L) 01
G3. Zone AO. G3. The following Information (llems G4-G9) is provided for commu	inity floodplain managemer	nt purposes.	
G4. PERMIT, NUMBER	GS. DATE PERMIT ISSUED	G6. DATE CERTI	FICATE OF COMPLIANCE/OC	CUPANCY
101-0764	9/6/0	ubstantial Improvement	12/17/01	1 1000
G7. This permit has been issued to	r: [] New Construction [] Sor (Including basement) of the building		9 <u>3_</u> @(m) Datum: _	116001929
G9. BFE or (in Zone AO) depth of f	looding at the building alte is:	Day	/ 100(m) Datum: _	NOUD 1929
LOCAL OFFICIAL'S NAME	+ Samitore		nunity Plann	<u>e. </u>
COMMUNITY NAME				
(,; ' () ()	al Part	TELEPHONE C54	1)664 3326	29/
SIGNATURE ON TO	al Point	DATE 1) 11	9)664 3324, 14/5/	19/
COMMENTS	al Point	DATE /2//	1)664-3321, 19/01 RPF at the	29/
COMMENTS	al Point It Similare In 2 Ensineering	DATE 12/1	1) 664 -3321, 19/01 BPE at the	19/
COMMENTS		DATE /2//	1)664-3321, 19/01 BFE at they um padeled	
COMMENTS		DATE /2//	2010	e if attachments